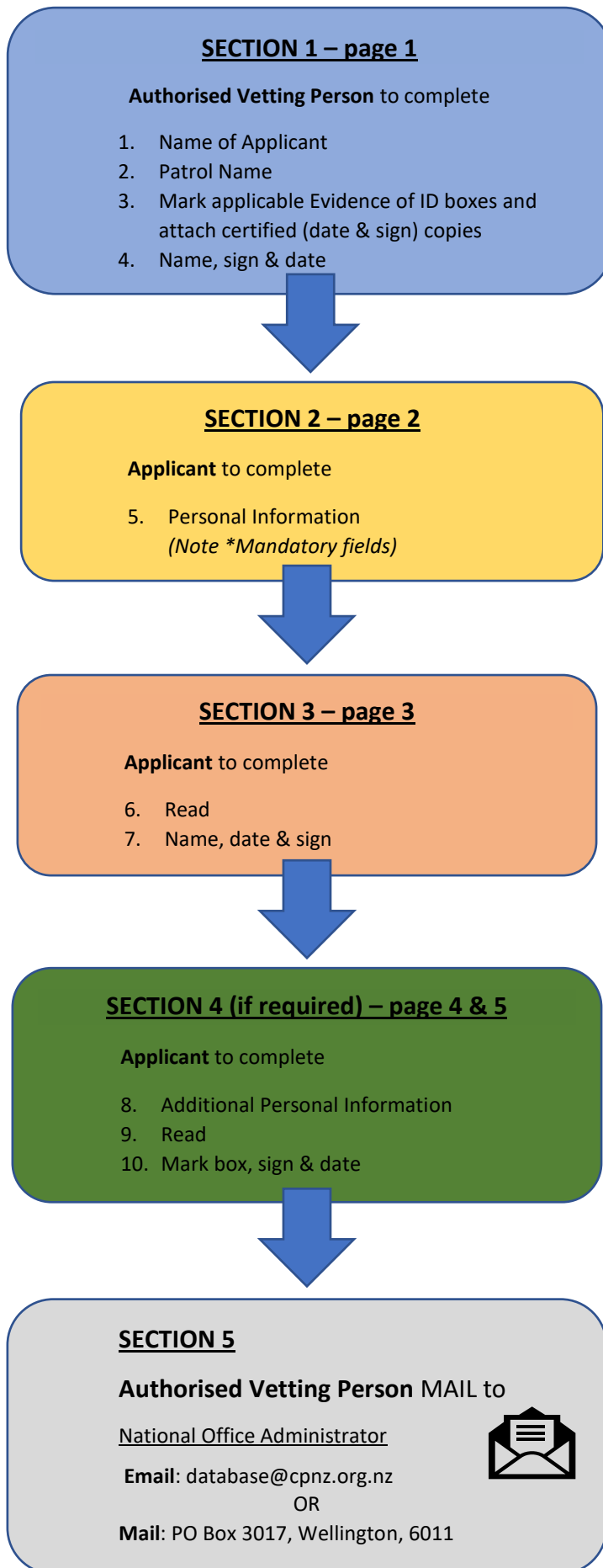


OVERVIEW :-COMPLETING THE VETTING REQUEST AND CONSENT FORM



Community Patrols of New Zealand

Guide to completing the Vetting Request and Consent Form

Section 1 to be completed by the Patrol Authorised Vetting Person (PAGE 1)

Applicant Details

Name of Applicant to be vetted:	Write in here the full name of the applicant to be vetted, please include middle names as well as full forms of abbreviated names (e.g. Michael instead of Mike).
Description of Applicant's role:	Write in here the Patrol Name .
The Applicant's purpose, group(s), primary role and mandate:	These fields are already filled in. Proceed to the Evidence of Identity section.

Evidence of Identity

To confirm the identity of the applicant, a **certified copy of two forms of ID** must be attached, one primary and one secondary, one of which must include a photo (ie Driver's License or Passport).

Primary IDs include:

- Passport (NZ or Overseas and not older than 5 years)
- NZ Firearms Licence
- NZ Full Birth Certificate (issued on or after 1998)
- NZ Citizenship Certificate
- NZ Refugee Travel Document
- NZ Emergency Travel Document
- NZ Certificate of Identity

Secondary IDs include:

- NZ Driver Licence
- 18+ card
- NZ full Birth Certificate (issued before 1998)
- Community Service card
- SuperGold Card
- Inland Revenue number
- NZ issued utility bill (not older than 6 months)
- NZ Employee Photo Identification Card
- NZ Student Photo Identification Card
- International Driving Permit

A certified copy of Evidence of Name change should be attached if the names differ on the two documents above e.g. a marriage certificate or statutory declaration.

✓ **Mark corresponding blocks and attach the applicable ID documents to the application.**

To verify the applicant's identity, the **Patrol Authorised Vetting Person** must:

1. Sight the original versions of each identity document.
2. Compare the photographic image with the applicant to confirm they are the same person.
3. Sign and date the attached copy of each ID document submitted to verify that the documents produced by the applicant relate to that person.
4. Provide his/her **name, date, and signature**.

Section 2 to be completed by the **Applicant** (PAGE 2)

Personal Information

Mandatory Information:

1. Applicant's name
2. Gender
3. Date of Birth
4. Place of Birth
5. Permanent Residential Address
6. Additional aliases:- please list all previously used names (maiden names etc)

Not Mandatory information but assists the Vetting Service in locating the correct identity in Police system:

7. NZ Driver licence number (leave field blank if the applicant does not have a NZ licence)

Section 3 to be completed by the **Applicant** (PAGE 3)

Consent to Release information

For Vetting Service to release any information the **applicant** needs to:

1. Read and understood all information outlined in Section 3.
2. Provide his/her **name, date, and signature**.

**If the applicant has lived in Australia at any given time, please continue to Section 4.
Otherwise skip to Section 5.**

Section 4 to be completed by the **Applicant** (PAGE 4) If required.

Australian National Police History Check (If required)

This section needs to be completed if the applicant is:

- Australian, or
- had a permanent Australian residential address, or
- has an Australian Driver Licence, or
- has an Australian passport.

Mandatory Information:

1. Number/Street
2. Suburb
3. Post Code
4. City/Town/Rural District
5. State or Territory

Not Mandatory information but assists the Vetting Service in locating the correct identity in Police system:

6. Period of Residence
7. Australian Driver's Licence Number
8. Australian Firearms Licence Number

Consent to Disclosure (for Australian National Police History Check) (PAGE 5)

For Vetting Service to release any information the **applicant** needs to:

- ✓ Tick the box to show that the applicant has read and understood the information
1. Provide his/her **signature and date**

Section 5 to be completed by the **Patrol Authorised Vetting Person**

Attach the certified ID copies to the completed application and email to database@cpnz.org.nz or mail to **CPNZ National Administrator**, PO Box 3017, **WELLINGTON**, 6140.